

Applies To: All OBGYN Department: Obstetrics and Gynecology Revised: 9/22/15 Effective Date: 9/22/15
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Title: <i>Ambulatory Care Clinic Policies</i>		<b>Policy</b>			
<b>Patient Age Group:</b>	<input checked="" type="checkbox"/> N/A	<input type="checkbox"/> All Ages	<input type="checkbox"/> Newborns	<input type="checkbox"/> Pediatric	<input type="checkbox"/> Adult

**Weekday Coverage (Monday – Friday)**

- Participants**  
 Division of Gynecology  
 Division of Midwifery  
 Division of Urogynecology  
 Resident PCC

**Special Considerations**  
 Exclusions – Does not include Women’s Imaging

- **Standardizing clinic start times**
  - All clinics will start at 8:00 AM for morning sessions
  - All clinics will start at 1:00 pm for afternoon sessions
  - It is expected that providers be present in the clinic at:
    - i. 7:55 am for AM session clinics
    - ii. 12:55 pm for PM session clinics
  - Any requests for different start times must be approved by 4<sup>th</sup> floor ACC medical directors on a case by case basis.
  - All divisions are allowed one day per week to start late for conferences or educational issues
    - i. Monday – MFM conference at 8; clinic starts at 8:30
    - ii. Thursday – Urogynecology Clinic Meeting at 8; clinic starts at 8:45
    - iii. Friday – Grand rounds at 8; resident PCC starts at 9:00
- **Implementation of “huddles” and “debriefs”**
  - Providers are required to participate in a 5 minute “huddle” with medical assistants and/or nurses prior to the beginning of each clinic session – standardized start times for both AM and PM clinic will help to facilitate. Huddles occur 5 minutes before the clinic session is

scheduled to begin: i.e., 7:55 AM and 12:55 PM. At huddles, please discuss the following issues

- i. Schedule review
  - ii. Clinic planning and flow
  - iii. Difficult patients or issues
  - iv. Possible procedures and equipment needed
- Debriefs are required at the end of clinic to review how clinic went as well as any possible improvements, review DNKAs (Did Not Keep Appointment)
    - i. Debriefs required for AM clinics
    - ii. PM Debriefs to occur depending on availability of clinic staff

- **Clinic schedule**

- All annual leave requests must be submitted 3 months in advance, this will allow for clinic schedules to be in place three months in advance.
- Schedules must be made on a rolling basis to ensure the clinic has at least 3 months to schedule patients at anytime.

- **Late patient arrivals**

- In accordance with UNM Health System-Patient Access Policy, “No UNM Health System clinic shall turn away any patient who shows up late for clinic appointments. Clinics will accommodate late patients within the session they were scheduled. If a patient arrives after the session and/or if a provider is no longer on site, the patient will be offered an alternate appointment date/time. “
- If a resident or faculty is requesting that front desk staff reschedule late patients, the front staff is to inform the medical Director/s.

- **Cancellation policy**

- No clinics will be canceled within 30 days
  - i. If a provider requests to miss a clinic within 30 days, coverage must be arranged. If the physician cannot arrange coverage, the Division Chief of the service is notified; only in an emergency can clinic be canceled within 30 days.
- Requests to cancel clinic within 2-3 months must be covered by the Division Chief. If s/he is unable to cover, the medical Director/s will be notified and cancellation will be considered on a case by case basis
  - i. Reasonable efforts must be made by the provider to attempt to find coverage
    1. Some flexibility will be allowed, such as freezing slots or moving patients to other times during the same day, such as to a morning session

2. It is the responsibility of the requesting provider to attempt to find coverage and assist with problem solving moving/rescheduling patients

- **Goals for patient access**

- In accordance with the UNM Health System-Patient Access Policy the 4<sup>th</sup> Floor Women's Health Clinic will strive to meet the following access for patients:
  - i. Specialty Care appointments
    1. Established patients - 10 days
    2. New patients - 15 days
    3. Create opportunities for same day appointments
- Standardized templates are currently being developed and will be implemented after faculty and staff input.

